

**FRANKLIN COUNTY (Post 1994)
COMMUNITY REINVESTMENT AREA APPLICATION**

PROPOSED AGREEMENT for Community Reinvestment Area Tax Incentives between the _____ located in the County of _____ and _____.

1. a. Name of property owner, home or main office address, contact person, and telephone number (attach additional pages if multiple enterprise participants).

Enterprise Name

Contact Person

Address

Telephone Number

- b. Project site:

Contact Person

Address

Telephone Number

2. a. Nature of commercial/industrial activity (manufacturing, warehousing, wholesale or retail stores, or other) to be conducted at the site.

- b. List primary 6 digit North American Industry Classification System (NAICS) # _____

Business _____ may _____ list _____ other _____ relevant _____ SIC numbers. _____

c. If a consolidation, what are the components of the consolidation? (must itemize the location, assets, and employment positions to be transferred: _____)

d. Form of business of enterprise (corporation, partnership, proprietorship, or other).

3. Name of principal owner(s) or officers of the business.

4. a. State the enterprise's current employment level at the proposed project site:

b. Will the project involve the relocation of employment positions or assets from one Ohio location to another? Yes____ No____

c. If yes, state the locations from which employment positions or assets will be relocated and the _____ location to where the employment positions or assets will be located:

d. State the enterprise's current employment level in Ohio (itemized for full and part-time and permanent and temporary employees):

e. State the enterprise's current employment level for each facility to be affected by the relocation of employment positions or assets:

- f. What is the projected impact of the relocation, detailing the number and type of employees and/or assets to be relocated?

5. Does the Property Owner owe:

- a. Any delinquent taxes to the State of Ohio or a political subdivision of the state?

Yes ___ No ___

- b. Any moneys to the State or a state agency for the administration or enforcement of any environmental laws of the State? Yes ___ No ___

- c. Any other moneys to the State, a state agency or a political subdivision of the State that are past due, whether the amounts owed are being contested in a court of law or not?

Yes ___ No ___

- d. If yes to any of the above, please provide details of each instance including but not limited to the location, amounts and/or case identification numbers (add additional sheets).

6. Project Description: _____

7. Project will begin _____, 20____ and be completed _____, 20____ provided a tax exemption is provided.

8. a. Estimate the number of new employees the property owner will cause to be created at the facility that is the project site (job creation projection must be itemized by the name of the employer, full and part-time and permanent and temporary):

- b. State the time frame of this projected hiring: _____ yrs.

- c. State proposed schedule for hiring (itemize by full and part-time and permanent and temporary employees):

9. a. Estimate the amount of annual payroll such new employees will add \$ _____
(new annual payroll must be itemized by full and part-time and permanent and temporary new employees).
- b. Indicate separately the amount of existing annual payroll relating to any job retention claim resulting from the project: \$ _____
10. An estimate of the amount to be invested by the enterprise to establish, expand, renovate or occupy a facility:
- | | | |
|----|--------------------------------------|----------|
| A. | Acquisition of Buildings: | \$ _____ |
| B. | Additions/New Construction: | \$ _____ |
| C. | Improvements to existing buildings: | \$ _____ |
| D. | Machinery & Equipment: | \$ _____ |
| E. | Furniture & Fixtures: | \$ _____ |
| F. | Inventory: | \$ _____ |
| | Total New Project Investment: | \$ _____ |
11. a. Business requests the following tax exemption incentives: _____ % for _____ years covering real _____ as described above. Be specific as to the rate, and term.
- b. Business's reasons for requesting tax incentives (be quantitatively specific as possible)

Submission of this application expressly authorizes _____ to contact the Ohio Environmental Protection Agency to confirm statements contained within this application including item # 5 and to review applicable confidential records. As part of this application, the property owner may also be required to directly request from the Ohio Department of Taxation, or complete a waiver form allowing the Department of Taxation to release specific tax records to the local jurisdiction considering the request.

The Applicant agrees to supply additional information upon request.

The Applicant affirmatively covenants that the information contained in and submitted with this application is complete and correct and is aware of the ORC Sections 9.66(C) (1) and 2921.13(D) (1) penalties for falsification which could result in the forfeiture of all current and future economic development assistance benefits as well as a fine of not more than \$1,000 and/or a term of imprisonment of not more than six months.

Name of Property Owner

Date

Signature

Typed Name and Title

* A copy of this proposal must be forwarded by the local governments to the affected Board of Education along with notice of the meeting date on which the local government will review the proposal. Notice must be given a minimum of fourteen (14) days prior to the scheduled meeting to permit the Board of Education to appear and/or comment before the legislative authorities considering the request.

** Attach to Final Community Reinvestment Area Agreement as Exhibit A

Please note that copies of this proposal must be included in the finalized Community Reinvestment Area Agreement and be forwarded to the Ohio Department of Taxation and the Ohio Development Services Agency within fifteen (15) days of final approval.

PLEASE RETURN TO:

**James Schimmer
Director
Franklin County Economic Development and Planning
Lazarus Building
150 S. Front Street, FSL Suite 10
Columbus, Ohio 43220
P: 614-525-7301
jrschimmer@franklincountyohio.gov**